PAZENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000												3+0	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			//					RATE	FEE] [RATE	FEE	
FOR			MUNBER FILED		NUMBER EXTRA			BASIC FE	₹ 355.00	ОЯ	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			// minus 20=		· B			X\$ 9-		ОЯ	X\$18=		
INDEPENDENT CLAIMS			// minus 3 -		8			X40⇒		88	X80=	640	
M	LTIPLE DEPEN	IDENT CLAIM P	RESENT					+135=	1	CR	+270=		
" If the difference in column 1 is less than zero, enter "O" in column 2							ł	TOTAL	+	OR	TOTAL	1350	
CLAIMS AS AMENDED - PART II										1-"	OTHER		
(Column 1) (Column 2) (Column 3)							l 1	SMALL	ENTITY	OR	SMALL		
AENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MENDMENT	Total	. //	Minus	C	2 0	•	Ц	X3 9-		OR	X\$18=	.]	
AME	Independent	· //	Mires	***	//			X40=		ОЯ	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	·	
11005								YOYAI ADDIT, FEI		ОЯ	YOYAL ADDIT, FEE		
6-10-03 (Column 1) (Column 2) (Column 3)									-	•			
AMENDMENT B		CLAUMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Š	Total	. 4	Minus	2	<u>v</u>	- /	11	X\$ 9=		OR	X\$18=		
¥	Independent - 2 FIRST PRESENTATION OF MI		Minus JLTIPLE DEF	PENDENT	QAIN.			X40=		ОЯ	X80=		
								+135=		OR	+270=		
, _								TOTAL		OR	YOTAL ADDIT, FEE		
7	-12-05	(Column 1)	<u></u>	(Colur		(Column 3)		n r 66		-	. —J. 11 FEG		
AMENDIMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER SUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	4	Minus	<u></u> -2	2	- 1	Į [X3 9=		ОЯ	X\$18=		
	Independent FIRST PRESE	NTATION OF AT	Minus	G	Cane	-/	ſľ	X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT O NM									OR.	+270=		
* If the entity in column 1 is less than the entry in column 2, write "If in column 3. "If the Pfighast Number Previously Paid For" IN THIS SPACE 1 less than 50, enter "20." "If the Pfighast Number Previously Paid For" IN THIS SPACE a less than 50, enter "20." ADDIT. FEE The Pfighast Number Previously Paid For" (Total or Indepen. and is replighest number tound in the appropriate box in column 1.													
	PTO ACE												

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